### DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

### **Provider Inspection Summary**

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

### **Facility Information**

**Facility Name: FAIR VIEW HOUSE (0010471)** 

Address: 109 FAIR VIEW DR, PLYMOUTH, WI 53073

**License Status: REGULAR** 

Licensed/Certified/Registered 02/23/2004

Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

Survey	History
Dui ve,	TIBUUT,

Survey ID: 0096386 End Date: 02/20/2006 Type: OTHER Purpose: DESK REVIEW

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0094446 End Date: 02/11/2005 Type: OTHER Purpose: DESK REVIEW

**Results:** ENFORCEMENT ACTION

Statement of Deficiency: #10007107 Served 04/04/2005

<u>Compliance</u>

Deficiencies CitedSubject AreaVerifiedCorrected50.065(6)(b)CREDENTIALED CAREGIVERS05/31/2005Yes

Survey ID: 0093565 End Date: 10/28/2004 Type: OTHER Purpose: COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0092016 End Date: 02/19/2004 Type: INITIAL Purpose: SURVEY

**Results:** LICENSE/CERT/REGISTRATION ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Bureau of Quality Assurance
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**Enforcement History** 

Date: 04/01/2005

SOD #10007107

Appealed: No

**Sanctions** 

COMPLY WITH REQUIREMENT

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P.O. Box 2969
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**Complaint History** 

Date Complaint Received: 04/21/2004 Date Investigation Completed: 10/28/2004

Subject Area(s) Result SOD #

STAFF TRAINING AND PROFICIENCY

NOT SUBSTANTIATED

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